FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

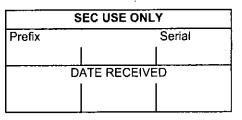
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OMB Number: 3235-0076

Expires April 30, 2008

Estimated average burden 16.00 hours per response:





Name of Offering (☐ check if this is an amendm LSV: Non-US Equity LLC (f/k/a Goldman Sac	ent and name has changed, and indicate change.) chs GMS International Equity Advisers 1 (LSV), L.L.C.): Limited Liability Company Units					
Filing Under (Check box(es) that apply):		Section 4(6) SIULOF					
Type of Filing: New Filing Amend	ment	Section 4(6) Supplied The Section 4(6) Section 4(6) Supplied The Secti					
	A. BASIC IDENTIFICATION DATA	al of C,					
1. Enter the information requested about the issu	uer	18 200					
Name of Issuer (☐ check if this is an amendm	ent and name has changed, and indicate change.)						
LSV: Non-US Equity LLC (f/k/a Goldman	Sachs GMS International Equity Advisers 1 (I	LSV), L.L.C.)					
Address of Executive Offices (N	umber and Street, City, State Zip Code)	Telephone Number (intridding Area Code)					
One New York Plaza, New York, New Yor	rk 10004	(212) 902-1000					
•	(Number and Street, City, State and Zip Code)	Telephone Number (Including Area Code)					
(if different from Executive Offices)	PROCESSI	T D					
Brief Description of Business							
To operate as a private investment fund.	DEC 3 1 2007	1					
	THOUGH						
Type of Business Organization	☐ limited partnership, alread FINANCIAL						
☐ corporation ☐ business trust	limited partnership, already bundle[A]	✓ other (please specify): Limited Liability Company					
🗆 business trust	thinked partnership, to be formed	Elinited Elability Company					
	Month Year						
Actual or Estimated Date of Incorporation or Organization	ganization: 0 7 0 5	☑ Actual ☐ Estimated					
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for							
, <u>-</u>	State: CN for Canada; FN for other foreign jun	risdiction) DE					
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GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

	A. BASIC IDENTIFICATION DATA
2.	Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;

* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and									
* Each general and managing partner of partnership issuers.									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director	Ø	General and/or Managing Partner							
Full Name (Last name first, if individual)									
Goldman Sachs Asset Management, L.P. (the Issuer's Managing Member)		·							
Business or Residence Address (Number and Street, City, State, Zip Code)									
One New York Plaza, New York, New York 10004									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director * of the Issuer's Managing Member		General and/or Managing Partner							
Full Name (Last name first, if individual)									
Aakko, Markus									
Business or Residence Address (Number and Street, City, State, Zip Code)									
One New York Plaza, New York, New York 10004		<u> </u>							
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director * of the Issuer's Managing Member		General and/or Managing Partner							
Full Name (Last name first, if individual)									
Gottlieb, Jason									
Business or Residence Address (Number and Street, City, State, Zip Code)									
One New York Plaza, New York, New York 10004									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director * of the Issuer's Managing Member		General and/or Managing Partner							
Full Name (East name first, if individual)									
Kelly, Edward									
Business or Residence Address (Number and Street, City, State, Zip Code)									
One New York Plaza, New York, New York 10004									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director * of the Issuer's Managing Member		General and/or Managing Partner							
Full Name (Last name first, if individual)									
Kramer, J. Douglas									
Business or Residence Address (Number and Street, City, State, Zip Code)									
One New York Plaza, New York, New York 10004									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director * of the Issuer's Managing Member		General and/or Managing Partner							
Full Name (Last name first, if individual)									
Ross, Hugh M.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
One New York Plaza, New York, New York 10004									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director * of the Issuer's Managing Member		General and/or Managing Partner							
Full Name (Last name first, if individual)									
Wade, Matthew									
Business or Residence Address (Number and Street, City, State, Zip Code)									
One New York Plaza, New York, New York 10004									

				B. IN	FORMAT	ION ABO	UT OFFI	ERING	.			
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.								Yes	No ☑			
 What is the minimum investment that will be accepted from any individual? *The Issuer's Managing Member may in its sole discretion accept subscription amounts in whatever amount it determines is acceptable. 									\$	*		
											Yes	No
	the offering										Ø	
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Full Name	e (Last name	first, if ind	lividual)									
Goldman,	, Sachs & C	0.*										
	h the securi r in any jur		sold throu	gh Goldma	n, Sachs &	Co., no co	mmissions	will be paid	l, directly o	r indirectly	y, for solici	ting any
	or Residence		Number and	Street, Cit	y, State, Zip	Code)						-
	Street, Nev			004						_		
Name of A	Associated E	Broker or De	ealer									
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Business (or Residence	· Address (1	Number and	Street, Cit	v. State. Zin	Code)						
					,,							
Name of A	Associated E	roker or De	ealer									
	Which Perso 'All States"							.,		*****************	🗆 AI	II States
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r un rvanic	c (Last Hame	, 1113t, 11 me	ii v i Guai j									
Business of	or Residence	Address (Number and	Street, Cit	y, State, Zip	Code)		·			<u> </u>	
Name of A	Associated E	Broker or De	ealer			-,					<u> </u>	
	Which Perso							(***********	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			All States
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$_	0	\$.	0
	Equity	\$_	0	\$	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$_	0	\$.	0
	Partnership Interests	\$ _	0	\$	0
	Other (Specify): Limited Liability Company Units		1,551,517,253	\$	1,551,517,253
	Total	\$	1,551,517,253	\$	1,551,517,253
	Answer also in Appendix, Column 3, if filing under ULOE.	_		•	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				Aggregate
			Number Investors		Dollar Amount of Purchases
	Accredited Investors	_	474	\$	1,551,517,253
	Non-accredited Investors		0	\$.	0
	Total (for filings under Rule 504 only)		N/A	\$	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.		•		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.				5.0
	Type of offering		Type of Security		Dollar Amount Sold
	Rule 505		N/A	\$	N/A
	Regulation A		N/A	\$	N/A
	Rule 504		N/A	\$	N/A
	Total	_	N/A	\$	N/A
tl tl	.a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	_			
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs			\$	0
	Legal Fees		ゼ	\$	86,573
	Accounting Fees			\$	0
	Engineering Fees			\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify)		0	\$	0
	Total		図	\$	86,573

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXP	ENS	ES A	ND USE OF P	ROCE	EDS	;
•	b. Enter the difference between the aggregate of - Question 1 and total expenses furnished in redifference is the "adjusted gross proceeds to the is	sponse to Part C - Question 4.a	. Thi	is		\$_		1,551,430,680
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b. above.								
					Payments to Officers, Directors, & Affiliates			Payments To Others
	Salaries and Fees			\$_	0	_ 🗆	\$.	0
	Purchase of real estate			\$_	0		\$ _	0
	Purchase, rental or leasing and installation of mac	hinery and equipment		\$_	0	_ 🗆	\$	0
	Construction or leasing of plant buildings and fac	ilities		\$_	0	_ 🗖	\$	0
	Acquisition of other businesses (including the varieties offering that may be used in exchange for another issuer pursuant to a merger)	r the assets or securities of	Ō	\$	0	_	\$	0
	Repayment of indebtedness			\$	0	-	\$	0
	Working capital			\$ -	0		\$	0
	Other (Specify): Limited Liability Company Ur			\$ \$	0	- 2	\$	1,551,430,680
	Column Totals			* - \$	0	- Ø	\$	1,551,430,680
							30,6	
		D. FEDERAL SIGNATUI	RE					-
fc	he issuer has duly caused this notice to be signed following signature constitutes an undertaking by the fits staff, the information furnished by the issuer to	e issuer to furnish to the U.S. So	curiti	es an	d Exchange Comi	mission,	upo	er Rule 505, the n written request
ssu	er (Print or Type)	Signature			Date			
GM.	SV: Non-US Equity LLC (f/k/a Goldman Sachs GMS International Equity Advisers 1 (LSV), L.C.) December 5, 2007							
Var	ne of Signer (Print or Type)	Title of Signer (Print or Type)						
٦.,	oline Kraus	Assistant Secretary of the Issu	er's l	Mana	ging Member			

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

